Supplemental Application Data Sheet

Application Information

Application Number:: 10/559,940

Filing Date:: December 8, 2005

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0

Title:: A SELF TEST SYSTEM FOR A

MEDICAL DEVICE

Attorney Docket Number:: 3003-1169

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency:: Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant One Authority

Inventor

Type::

Primary Citizenship

UNITED KINGDOM

Country::

Status::

Full Capacity

Given Name::

DESMOND

Middle Name::

BRYAN

Family Name::

MILLS

Name Suffix::

City of Residence::

GLOUCESTERSHIRE

State or Province of

Residence::

Country of Residence::

UNITED KINGDOM

Street of Mailing Address::

IXA MEDICAL PRODUCTS LIMITED

DEZAC HOUSE, MONTPELLIER STREET,

CHELTENHAM

City of Mailing Address::

GLOUCESTERSHIRE

State or Province of Mailing Address::

Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing

GL50 1SS

Address::

Applicant <u>Two</u> Authority Inventor

Type::

Primary Citizenship Country:: UNITED KINGDOM

Status:: Full Capacity

Given Name:: KEVIN

Middle Name::

Family Name:: HERBERT

Name Suffix::

City of Residence:: GLOUCESTERSHIRE

State or Province of

Residence::

Country of Residence:: UNITED KINGDOM

Street of Mailing Address:: IXA MEDICAL PRODUCTS LIMITED .

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CHELTENHAM

City of Mailing Address:: GLOUCESTERSHIRE

State or Province of Mailing

Address::

Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing GL50 1SS

Address::

Correspondence Information

Correspondence Customer Number:: 00466

Representative Information

Representative	Customer Number::	00466

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing	
			Date::	
This application	National Stage of	PCT/GB2004/002522	6/14/04	
L				

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
UNITED KINGDOM	0313815.3	6/14/03	Yes

Assignment Information

Assignee Name::

IXA Medical Products LLP

Street of Mailing Address::

Dezac House, Montpellier Street

City of Mailing Address::

Cheltenham

State or Province of Mailing Address::

Gloucestershire

Country of Mailing Address::

UNITED KINGDOM

Postal or Zip Code of Mailing Address::

GL50 1SS